

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Aug 08, 2006 8:00 am**  
**Secretary of State**

08-08-2006 90002 026 \*\*\*150.00

20051928



08022006 Chg-P CR2E034 (11/05)

4. FEI Number **65-1157510** Applied For ☐ Not Applicable ☐

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

## 6. Name and Address of Current Registered Agent

HUESING, ANN  
~~600 NE 10TH AVE~~ 4043 NE SKYLINE DR.  
JENSEN BEACH, FL 34957

## 7. Name and Address of New Registered Agent

Name  
Street Address (P.O. Box Number is Not Acceptable)  
City FL Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$550.00**  
**Due by September 6, 2006**

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

## 10. OFFICERS AND DIRECTORS

TITLE D ☐ Delete  
NAME HUESING, ANN  
STREET ADDRESS ~~600 NE 10TH AVE~~  
CITY-ST-ZIP JENSEN BEACH, FL 34957

TITLE D ☐ Delete  
NAME HUESING, DONALD J  
STREET ADDRESS 2435 STRATFORD UPON AVON BLVD  
CITY-ST-ZIP ORLANDO, FL 32837

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

## 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 4043 NE SKYLINE DR.  
CITY-ST-ZIP JENSEN BEACH FL 34957

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Ann Huesing ANN HUESING 8-2-06 772-232-1925  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

**HIGHWAY ONE LOGISTICS, INC.**

08-02-2006

ATTACHMENT  
20051928

To: Divisions of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

From: Ann Huesing  
Highway One Logistics, Inc.  
P.O. Box 605  
Jensen Beach, Florida ~~34958-0605~~

Reference: Document #P01000113724

Dear Sir/Madam,

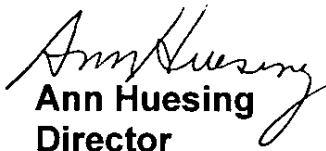
IN APRIL 2006.

This letter is to confirm that I sent the form and check to file the annual profit report for 2006. I assumed that everything was done but after checking with the bank the check was never cashed and assumed lost in the mail.

Please accept my new report with address changes and my money order for \$150.00 to process my report. Please excuse me for any inconvenience.

Any questions please call me at 772-232-1925.

Sincerely,

  
Ann Huesing  
Director

P.O. BOX 605  
JENSEN BEACH, FL 34958-0605